

Antiracism in public health: (my) reflections on language and actions

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The language used to express antiracism

Diversity

Inclusion

Tolerance

On July 3rd I wrote this in a BMJ Opinion piece: [Let's equalise our antiracist language](#)

“Diversity” and “inclusion” imply charity from a position of power and superiority. They give the impression that the group who is opening the door to diversify and include others still holds the key. The point of antiracism is that there should not be a key in the first place. The door should be widely open to all. Clubs with locked doors should not exist in an equitable society. Once that is achieved, the natural result of equity is diversity. It is the end not the means.

Recognition
How am I seen?



Alexandra Wilson

@EssexBarrister



I thought I'd explain what happened today because I'm absolutely exhausted and tbh I think a light needs to be shone on this. Especially given so many people like me seem to experience the same thing.

8:42 PM · Sep 23, 2020 · Twitter for iPhone

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I was told "very loudly to get out of the courtroom"



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I'm fed up of people not introducing me by my titles in public forums. I am a Dr (medic & PhD). I'm an Associate Professor. I worked hard to gain these titles & I don't give permission to omit them. Just because I'm an ethnic minority woman doesn't mean that I'm just 'Nisreen'!

10:26 AM · Sep 25, 2020 · Twitter for iPhone

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'Imposter Syndrome' Not?

Imposter Syndrome may not be 'all in our head' as we are led to believe. Some of us genuinely have to work twice as hard to prove oneself due to the value others assign to people based on appearances and stereotypes.

Tell me your story

To be repeatedly asked to share personal experiences of exclusion and oppression with no remedial action is in itself an act of exclusion and oppression. It places the burden of proof on already marginalized and minoritised folk putting them in an even more vulnerable position.

Disproportionate burden to fix things on those
most disadvantaged by what needs fixing

Intersectionality

No one had a single characteristic identity.
Our experiences are variable and unique.

Seven things organisations should be doing to combat racism

1. Articulate specific, bold, meaningful goals (with specificity, timelines and ownership) that relate to action and change, not stances, feelings or generalisations. Goals should be endpoints not processes. Language should be clear- the goal is to address racism. Not merely “culture”
2. In creating goals, aim high. Not the slow “don’t rock the boat” approach where expectations for diverse members of the team begins and ends with their arrival. Intermediate goals (e.g. diversity) are better thought of as natural by-products of higher-level efforts
3. Goals linked to metrics

Seven things organisations should be doing to combat racism

4. Contribute to the knowledge base

5. Thorough in scrubbing out inequity from every place, process and practice

6. Transform the workforce including leadership

7. Invest heavily in dismantling racism. Equity efforts require strong, high-level, and sustained financial investment

Seven more things organisations should be doing to combat racism

- End avoidance and silence about the real and present problem of racism. Talking about racism can be uncomfortable but avoiding the topic is harmful to those experiencing it
- Target exclusivity explicitly
- Expect and embrace backlash as a natural part of meaningful change

What questions to ask?

Research funding

[NIHR PHR funding call: Targeted mass media interventions for Black, Asian and Minority Ethnic populations](#)

Are culturally competent, targeted mass media interventions effective and cost-effective in promoting healthy behaviours to reduce the risk of disease in black, Asian and minority ethnic populations ?

Why not... mass media campaigns to make the system operators aware of structural racism rather than focusing entirely on getting the victims of it to change behaviours?

“Racial equity in the workforce is both a mediator
and a moderator of health equity”

Esther choo

- Where I am from
- What I felt then
- Pictures of me
- EDI language
- Antiracism actions

COVID19, race and public health. Lee, Alwan, Morling

“The system is still structurally racist. That is why we need to tackle this as public health professionals. It is not just about ignorant individuals spouting hate. It is about **reforming systems**. Racism has a direct and indirect influence on ill physical and mental health. We already have enough evidence on that, accumulated over many years. COVID19 gave us more on how structurally racist systems can seriously disadvantage certain racial groups' health and existence. We must openly talk about how to tackle racism in public health. It is our business to do so. **No more taboos.**”

The world is changing and if we in public health don't champion antiracism and practice humility and inquisitiveness in how to do this well then WHO WILL?

“Language is important because it shapes our feelings, thoughts and expectations, which in turn shape our actions. Let’s equalise it and remove from it any inference of superiority of one group over another. My plea to you reading this is to consider using alternative words such as **equity**, **justice**, and **belonging** to bring more fairness into the actions shaped by our words.”

“What I want to feel is simply equal. This is what everyone deserves to feel. To me, it is not just semantics. It is the foundation of how I see myself and how others see me as part of society.”

['Diversity', 'tolerance', 'inclusion'... why language matters | Dr Nisreen Alwan](#)